

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

This is a (check one)	<input checked="" type="checkbox"/> Party Committee	<input type="checkbox"/> Political Action Committee
This is an (check one)	<input type="checkbox"/> Initial Statement	<input checked="" type="checkbox"/> Amended Statement

COMMITTEE (PLEASE TYPE OR PRINT)

Name Kansans for a Democratic House	
Mailing Address (Street, City, State, Zip Code) PO Box 2083, Topeka, KS, 66601	Business Telephone ( 785 ) 296-5623

CHAIRPERSON

Name Tom Burroughs	Home Telephone ( 913 ) 375-1956
Mailing Address (Street, City, State, Zip Code) 3131 SO 73rd Ter, Kansas City, KS 66106	Business Telephone ( 785 ) 296-5623

TREASURER

Name Annie Tietze	Home Telephone ( 785 ) 273-5296
Mailing Address (Street, City, State, Zip Code) 329 SW Yorkshire Rd, Topeka, KS 66606	Business Telephone ( 785 ) 296-5623

AFFILIATED OR CONNECTED ORGANIZATIONS

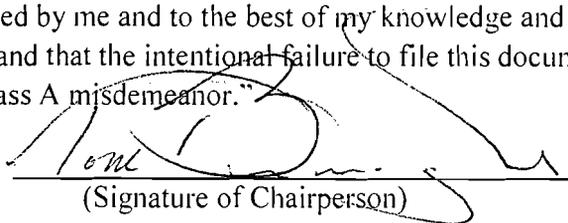
Name Kansas House Democrats
Mailing Address (Street, City, State, Zip Code) PO Box 2083, Topeka, KS, 66601

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

SIGNATURE:

"I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor."

1-9-15  
(Date)

  
(Signature of Chairperson)

[Print this form](#) or [Go Back](#)

**Campaign Finance  
Statement of Organization  
For Political Action Committees  
And Party Committees**

Governmental Ethics Commission  
109 W. 9th, Suite 504  
Topeka, KS 66612  
Phone (785) 296-4219  
Fax (785) 296-2548  
[www.kansas.gov/ethics](http://www.kansas.gov/ethics)

This is a (Check one)  **Party Committee**  **PAC**

This is an (Check one)  **Initial Appointment**  **Amended Statement**

**Committee**Name: **Kansans for a Democratic House**Address: **PO Box 2083**

Address2:

City: **Top** State: **KS** Zip: **66601-2083**Business Phone: **(785) 296-5623**Email Address: **info@kshousedems.com****Chairperson**Name: **Paul Davis**Address: **1731 Indiana**

Address2:

City: **Lawrence** State: **KS** Zip: **66044**Home Telephone: **(785) 550-1334** Business Phone: **(785) 331-0300**Email Address: **paul.davis@kshousedems.com****Treasurer**Name: **Annie Tietze**Address: **329 SW Yorkshire Road**

Address2:

City: **Topeka** State: **KS** Zip: **66606**Home Telephone: **(785) 273-5296** Business Phone:Email Address: **atietze@cox.net****Affiliated or Connected  
Organizations**Name: **Democractic House Campaign Committee**Address: **PO Box 2083**

Address2:

City: **Topeka** State: **KS** Zip: **66601-2083**

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

**I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor.**

Executed on:

Date: **12/28/2011 4:16:10 PM** Signature of Chairperson: **Paul Davis**[Print this form](#) or [Go Back](#)